

POSITION	ID NO.	DATE
CLASSIFIER	103	1/12/95
EXAMINER	602	1/14
TYPIST	315	1/15
VERIFIER		1/16
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

## INDEX OF CLAIMS

Claim	Date
Final	
Original	
6 13	1 9 6
6 13	6 5 7
6 13	7 1 02
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14	N
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17 ✓ ✓	
18 ✓ ✓	
19 ✓ ✓	
20 ✓ ✓	
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23 ✓ ✓	
24 ✓ ✓ A ↓	
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26 N	
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32 N	
33 N	
(34) N	
(35) N	
36 N	
37 N	
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(39) N	
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41 N	
42 N	
(43) N	
44 N	
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SYMBOLS

✓	Rejected
=	Allowed
-	(Through number) Canceled
+	Restricted
N	Non-elected
	Inference
A	Amended
O	Objected

Claim	Date
Final	
Original	
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